Effective October 1, 2001													
CLAIMS AS FILED - PART I (Column 1) (Column 2)								MALL E	NTITY	OR	OTHER SMALL		
то	TAL CLAIMS						ſ	RATE	FEE		RATE	FEE	1
FO	₹		NUMBER FILED		NUMBER EXTRA		6	BASIC FEE	370.00	OR	BASIC FEE	740.00	/ ا
TOTAL CHARGEABLE CLAIMS			43 minus 20=		· 23		ļ	X\$ 9=		OR	X\$18=	414.	1
INDEPENDENT CLAIMS			3 minus 3 =		*		Ī	X42=	( i	OR	X84=		
MUI	LTIPLE DEPEN	DENT CLAIM P	RESENT					+140=		OR	+280=		1
* If :	the difference	ro, ente	r "0" in c	olumn 2	L	TOTAL		OR	TOTAL		1		
CLAIMS AS AMENDED - PART II									ENTITY	OR	OTHER		1
	(Column 1) (Column 2) (Column 3) CLAIMS HIGHEST								ADDI-		SWALL	ADDI-	1
NTA		REMAINING AFTER AMENDMENT		NUM PREVI	BER OUSLY FOR	PRESENT EXTRA		RATE	TIONAL FEE		RATE	TIONAL FEE	
AMENDMENT	Total	. 43	Minus	** 4	13	= , <del></del> .		X\$ 9=		OR	X\$18≘		<u>.</u>
ME	Independent	· _ 3	Minus	***	3_			X42=		OR	X84=		
	FIRST PRESE	NTATION OF M	ULTIPLE DEP	ENDEN	T CLAIM			+140=		OR	+280=		1
							L	TOTAL		OR	TOTAL ADDIT. FEE		1
		(Column 1)		(Colu	ımn 2)	(Column 3)	•	WDIII. FEE			700		1
NT B		CLAIMS REMAINING AFTER AMENDMENT		HIG NUM PREV	HEST MBER IOUSLY D FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
AMENDMENT	Total	. 31	Minus	** /	43	= —		X\$ 9=		OR	X\$18=		
AME	Independent	* 2 NTATION OF M	Minus	###	3 TCLAIM	-		X42=		OR	X84=		]
	FIRST PRESE	NIATION OF W	,	CHOCK	T ODAM		'	+140=		OR	+280=		
							,	TOTAL ADDIT, FE		OR	TOTAL ADDIT. FEE		]
		(Column 1)		(Colu	umn 2)	(Column 3)					**		l
NT C		CLAIMS REMAINING AFTER AMENDMENT		HIG NUI PREV	HEST MBER (IOUSLY D FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
AMENDMENT	Total	*	Minus	##		=		X\$ 9=		OR	· X\$18=		
ME	Independent		Minus	***		<u> </u> =		X42=		OR	X84=		1
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM									ÒR		1	1
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.  ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."  **ADDIT. FEE										OR	TOTAL		1
=	elf the "Lichart No	imber Previously imber Previously nber Previously P	Paid For IN TH	IS SPACI	E is less th	an 3. enter "3."				_	ADDII. FE	I <b>E</b>	

Application or Docket Number